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## EDITORIAL

### CMA Plan for Health Care for the Aged

ON JANUARY 9, Doctor Donovan F. Ward, president of the American Medical Association, announced a new proposal for the provision and financing of health care of the aged across the country. Acting swiftly, the California Medical Association announced its plans for implementing the proposal in this state. The program and an explanation of the reasons for it were set forth February 1 by Doctor James C. Doyle, CMA president, in a statement to all news media in California.

First calling attention to the California Medical Association's long-standing policy that "high quality medical care should be available to all persons in this state, regardless of race, creed, color, or financial status," Dr. Doyle continued:

"As physicians, we recognize that our responsibilities go far beyond the essential task of providing personal care for individual patients. We are intimately involved in many general problem areas relating to the health of the people of this state—among them the availability and cost of medical care. The unique problems of financing medical care costs of the elderly have been of most urgent concern to us.

"Thanks to ever-accelerating medical advances, people are living longer. With the pleasures of longevity, however, certain problems of long life also occur. Older people are susceptible to the illnesses inherent in long life. Many older people face longer periods of medical and hospital expense than in earlier years. Our elderly are often without the support of family at a time when they need it most,

and are vulnerable to inflation because of the fixed nature of their incomes.

"We are as aware of these developing problems as we are of problems of heart disease and cancer. In the past we have initiated and consistently supported measures designed to provide adequate medical care for the elderly—whether these measures were in the form of expansion of voluntary health insurance availability and coverage or in partnership programs between voluntary organizations and state and local government for persons unable to provide for themselves.

"We are recommending that the State Legislature approve the California Plan of Medical Assistance for the Aged embodied in a bill sponsored by Assemblyman Jack T. Casey. Under this plan, we recommend that prepaid comprehensive medical care—including payment for hospitalization, nursing home and physicians' bills—be provided for persons over 65 whose limited incomes make it impossible for them to pay costs of major illness from their own resources. I emphasize the term "comprehensive care."

"Such a prepayment program, financed by federal and state matching funds, could be administered by voluntary health insurance or prepayment organizations which would receive premiums from state government for the eligible beneficiaries. We believe that this prepayment concept for comprehensive care of the elderly on a state-wide basis would eliminate much of the red tape and the stigma of charity attached to existing health and welfare programs.

"A simple income statement could be used as a basis for eligibility—the certification to be made even before illness strikes. State government, after estimating the number of potential recipients, could pay—with state and matching federal funds—group premiums to the designated insurance carriers. The patient served in this manner by the voluntary prepayment agencies would have his hospital and physicians' bills paid for him in the same way as the patient who purchases his own insurance.